GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA

UNSTARRED QUESTION NO:2270
ANSWERED ON:29.07.2016
Epidemic Outbreaks
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Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether a number of epidemic outbreaks including dengue and other vector borne and infectious diseases occur every year, particularly during the monsoon seasons in the country;

(b) if so, the details of such epidemics occurred during the last three years, along with the number of cases and deaths reported, disease and State/UT-wise;

(c) whether the situation of dengue fever is more worrisome in comparison to previous years, if so, the details thereof; and

(d) the effective and preventive measures taken up by the Government to combat these diseases and to avoid recurrence of epidemics in the country?

Answer

ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI FAGGAN SINGH KULASTE)

(a) & (b) Upsurge of cases due to Dengue and other Vector Borne Diseases viz. Malaria and Japanese Encephalitis occurs particularly during the monsoon season in the country. Seasonal upsurge of Malaria and Japanese Encephalitis is known during monsoon and post monsoon season.

Under Integrated Disease Surveillance Programme (IDSP), every week States/UTs report outbreaks/early warning signals due to infectious diseases occurring in the country.

The State/UT-wise cases and deaths due to Malaria, Dengue, Chikungunya, and Japanese Encephalitis (JE) occurred during the last three years are at Annexure-I, II, III, & IV.

(c): Yes. The comparative dengue situation in the country during previous years & current year (till June) is as under:

Years	2014	2015	2016
Cases	4399	6394	8307
Deaths	8	23	10

(d): Steps/actions taken to prevent and control the vector borne diseases and infectious diseases are as under:

Dengue/Chikungunya:

During the year 2016, Government of India (GOI) has taken the following measures for prevention and control of Dengue & Chikungunya in the country:-

â€¢ Provided Technical Guidance to the States for prevention and control of dengue, including clinical management of dengue.

â€¢ Periodic reviews are being done at the level of Hon'ble HFM, Secretary, H&FW and DGHS. Since January, 2016, a total number of 13 review meetings have been taken by HFM, Secretary (H&FW), Additional Secretary, DGHS and Spl. DGHS with functionaries of different States/UTs.

â€¢ Periodic advisories have been issued from time to time for prevention and control of Dengue. 10 advisories have been issued at the levels of Secretary (H&FW) and Addl. Secretary (H&FW) to all concerned for taking timely action in this regard.

â€¢ States have been requested to declare Dengue as notifiable disease vide MOHFW's letter No.7-165/2016/NVBDCP /DEN dated 9th June 2016 and the same has been uploaded on the National Vector Borne Disease Control Programme (NVBDCP)

website for taking action accordingly.

â€¢ Focused IEC/BCC activities are carried out at National and State level with media mix strategies focusing on source reduction and personal protective measures.
? A user friendly Dengue App "India Fights Dengue" has been launched by HFM, on 7th April, 2016.
? National Dengue Day has been observed on 16th May 2016 throughout the country.

â€¢ Dengue & Chikungunya diagnosis is provided through 527 Sentinel Surveillance Hospitals (SSHs) and 15 Apex Referral laboratories (ARLs) across the country.

â€¢ Accredited Social Health Activists (ASHAs) are also involved in source reduction activities for dengue prevention and control.

â€¢ Periodic field visits are made by NVBDCP Officials to States/UTs for review and to provide technical guidance for prevention and control of Dengue & Chikungunya.

Malaria:

The Government has the following strategy for malaria control in the country:

1. Surveillance and case management
â€¢ Case detection (active and passive)- Intensified during high transmission period
â€¢ Early diagnosis and complete treatment
â€¢ Sentinel surveillance

2. Integrated Vector Management (IVM)
â€¢ Indoor residual spray (IRS)
â€¢ Insecticide treated bed nets (ITNs) / Long-Lasting Insecticidal nets (LLINs)
â€¢ Anti-larval measures including source reduction

3. Epidemic preparedness and rapid response.

4. Supportive interventions
â€¢ Capacity building
â€¢ Behaviour change communication (BCC)
â€¢ Intersectoral collaboration
â€¢ Monitoring and evaluation (M & E)
â€¢ Operational research and applied field research

Other steps to combat and to avoid recurrence of epidemics of malaria are as follows:-

1. Regular monitoring of the reports received from the states and feedback to the states accordingly.

2. Coordination with IDSP to detect Early Warning Signals i.e. any upsurge in fever cases or any reports of malaria outbreaks. Such reports are verified, followed up and managed accordingly.

3. Regular monitoring through field visits of NVBDCP officers/ consultants.

4. Issuing advisory to the states before the monsoon season to upscale their activities and make all the necessary preparations.

5. Technical support and guidance.

6. Logistic support.

Japanese Encephalitis (JE):

A multipronged strategy has been adopted under the National Programme to reduce morbidity, mortality and disability in children due to JE. Major components under the programme are :

(i) Strengthening of surveillance, vector control by establishing sentinel laboratories.

(ii) Strengthening and expansion of JE vaccination in endemic districts;

(iii) Strengthening of case management by setting 10 bedded pediatric ICU in 60 district hospitals and timely referral of serious and complicated cases;

(iv) Provision of adequate facilities for physical, medical, neurological and social rehabilitation;

(v) Improvement of nutritional status of children at risk and intensified IEC/BCC activities.

Establishment of Physical Medicine and Rehabilitation Department in 10 identified medical college of five states.

Financial: Funds are provided by Govt. of India to the States for prevention and control of Vector Borne Diseases (VBDs) including Dengue, to implement the public health activities.

Integrated Disease Surveillance Programme (IDSP):

Under IDSP, the districts and States have been strengthened by providing additional manpower, training of identified Rapid Response Team (RRT) members for outbreak investigations, strengthening of laboratories for detection of epidemic prone diseases, ICT equipment for data entry, analysis and data transfer, and provision of funds for operationalization.

Funds are released under IDSP to all the States as grant−in−aid to undertake diseases surveillance activities.